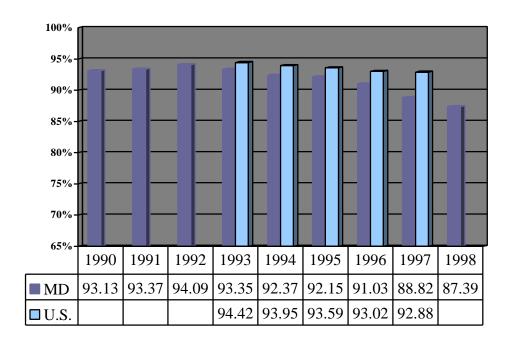
# Characteristics of Long Term Care Facilities

For this section, of the chartbook, the focus changes from the residents to the facilities. Current status and trends are examined for areas such as occupancy, bed capacity, bed to population ratios, and length of stay.

## NURSING HOME OCCUPANCY

Figure: 45. Trends in Nursing Home Occupancy, Maryland, 1990 – 1998; U.S. 1993 - 1997

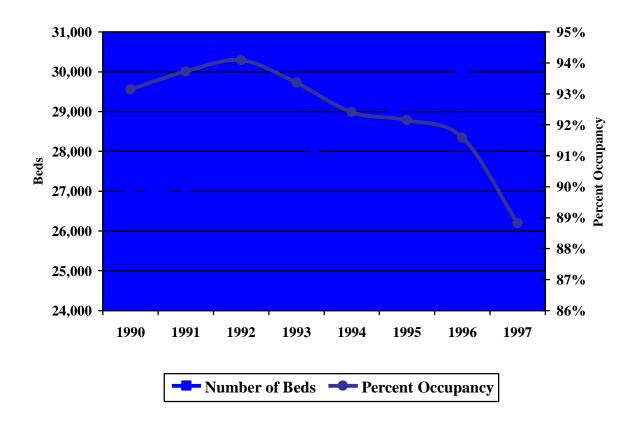


Source: Maryland Health Care Commission, Maryland Long Term Care Surveys, 1990 – 1997; Maryland Subacute Care Surveys, 1995 – 1997; HCIA, <u>Guide to the Nursing Home Industry</u>, 2000 and 1997 editions.

Nursing home occupancy has been decreasing nationwide and in Maryland during recent years. In Maryland, overall nursing home occupancy averaged 93-94 percent between 1990 and 1993. By 1998, nursing home occupancy had declined to 87 percent.

The decrease in nursing home occupancy can be attributed to a number of factors, including the development of alternative services, such as home health, assisted living, and adult day care.

Figure 46. Nursing Home Occupancy and Growth in Nursing Home Bed Capacity: Maryland, 1990 - 1997



Source: Maryland Health Care Commission. Maryland Long Term Care Surveys, 1990 – 1997; Maryland Subacute Care Surveys, 1995 – 1997.

(NOTE: Bed counts from the Maryland Long Term Care Survey exclude Charlotte Hall Veterans Home and Atlantic General Hospital)

# TRENDS IN BED TO POPULATION RATIO

Table 17. Population 65 Years and Older, Licensed Comprehensive Care Beds, and Beds Per 1,000 Population by Region and Jurisdiction: Maryland, 1990, 1995, 2000

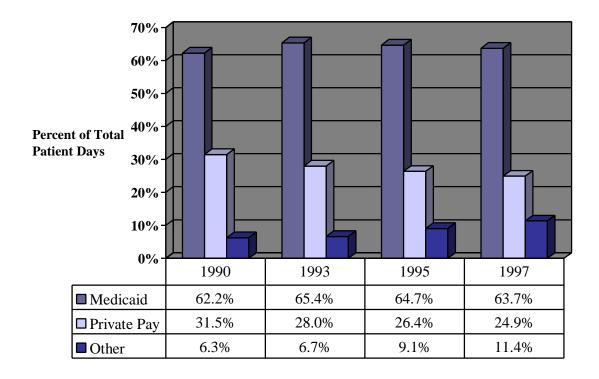
	Population 65 Years and Older			Licensed Comprehensive Care Beds			Beds Per 1,000 Population 65 Years and Older		
Region / Jurisdiction									
	1990	1995	2000	1990	1995	2000	1990	1995	2000
Western Maryland									
Allegany County	13,038	13,516	12,798	723	923	931	55.45	68.29	72.75
Carroll County	11,671	13,409	14,968	700	805	811	59.98	60.03	54.18
Frederick County	13,144	15,285	16,760	731	874	1,043	55.61	57.18	62.23
Garrett County	3,538	3,816	3,779	307	371	344	86.77	97.22	91.03
Washington County	15,497	16,737	16,991	1,178	1,243	1,293	76.01	74.27	76.10
Total	56,888	62,763	65,296	3,639	4,216	4,422	63.97	67.17	67.72
Montgomery County									
Montgomery County	72,997	82,511	88,081	4,198	4,446	4,816	57.51	53.88	54.68
Total	72,997	82,511	88,081	4,198	4,446	4,816	57.51	53.88	54.68
Southern Maryland									
Calvert County	4,538	5,621	6,648	150	236	294	33.05	41.99	44.22
Charles County	6,265	7,218	8,420	254	350	377	40.54	48.49	44.77
Prince George's County	47,652	54,676	61,324	2,546	2,710	2,858	53.43	49.56	46.60
St. Mary's County	5,686	6,443	7,586	415	615	337	72.99	95.45	44.42
Total	64,141	73,958	83,978	3,365	3,911	3,866	52.46	52.88	46.04
Central Maryland									
Anne Arundel County	35,986	41,751	45,762	1,442	1,683	1,700		40.31	37.15
Baltimore County	90,713	98,616	100,984	5,611	5,732	6,041	61.85	58.12	59.82
Baltimore City	94,784	89,676	78,357	5,372	5,231	6,298		58.33	80.38
Harford County	14,461	18,054	20,641	541	670	657	37.41	37.11	31.83
Howard County	10,954	13,445	16,454	366	573	524	33.41	42.62	31.85
Total	246,898	261,542	262,198	13,332	13,889	15,220	54.00	53.10	58.05
Eastern Shore									
Caroline County	3,660	3,809	3,820	196	257	237		67.47	62.04
Cecil County	6,743	7,443	7,928	313	438	446		58.85	56.26
Dorchester County	4,943	5,073	4,917	291	309	313		60.91	63.66
Kent County	2,917	3,170	3,289	74	189	204		59.62	62.02
Queen Anne's County	4,167	4,862	5,426	180	180	180		37.02	33.17
Somerset County	3,286	3,302	3,161	188	207	210		62.69	66.43
Talbot County	5,734	6,247	6,363	341	347	358		55.55	56.26
Wicomico County	8,882	9,527	9,440	604	692	742		72.64	78.60
Worcester County	5,754	7,008	8,178	315	325	376	54.74	46.38	45.98
Total	46,086	50,441	52,522	2,502	2,944	3,066	54.29	58.37	58.38
	10= 11								
Maryland Total	487,010	531,215	552,075	27,036	29,406	31,390	55.51	55.36	56.86

#### **Source:**

Maryland Health Care Commission (Population estimates by age group are from the Maryland Office of Planning, updated Feburary 2000; licensed comprehensive care beds for 1990 and 1995 reflect beds at the end of the fiscal year as reported in MHRPC's *Maryland Nursing Home Occupancy* for those years; and comprehensive care beds for 2000 are from MHRPC's *Inventory of Comprehensive Care Beds, September 30, 1999*.)

# NURSING HOME UTILIZATION

Figure 47. Utilization of Nursing Homes by Payer Source: Maryland, 1990 – 1997



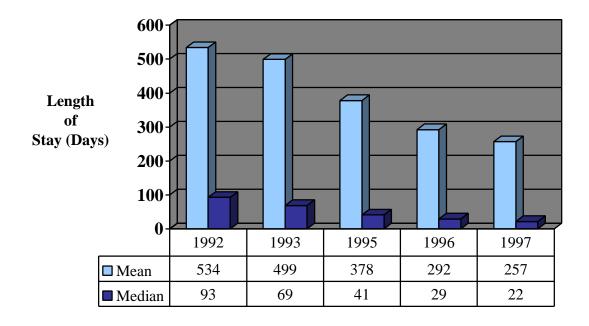
Source: Maryland Health Care Commission, Maryland Long Term Care Surveys, 1990 – 1997; Maryland Subacute Care Survey, 1995 – 1997.

(NOTE: Utilization figures are shown as a percent of patient census days by payer source. Medicare is included in "Other". Includes all comprehensive and subacute care facilities.)

It should be noted that Medicare is included in the "Other" category. The increase in the "Other" category is partly explained by the increase in subacute care capacity, which primarily serves short stay Medicare patients.

While Medicaid utilization remained stable between 1990 and 1997, utilization by private payers has decreased. In 1990, private pay accounted for 31.5 percent of total nursing home patient days of care. By 1997, patient days paid for by private funds had declined to 25 percent of total days.

Figure 48. Trends in Mean and Median Length of Stay for all Comprehensive Care Facilities: Maryland, 1992 – 1997



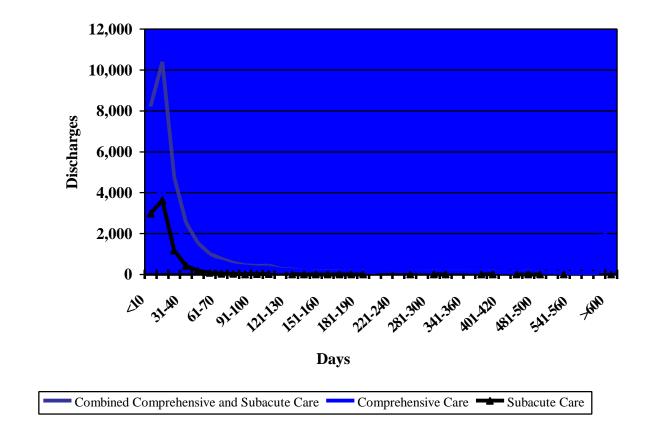
Source: Maryland Health Care Commission, 1992 – 1997 Maryland Long Term Care Surveys;

Maryland Subacute Care Surveys, 1995 – 1997. NOTE: Unduplicated count of discharges

Since 1992, both mean and median lengths of stay for nursing homes have decreased. The development of subacute care facilities in Maryland, whose focus is primarily short stay patients, has played a part in this change.

The changes in average length of stay for subacute vs. comprehensive care are discussed in more detail in Figure 49

Figure 49. Distribution of Length of Stay for Comprehensive Care Only and Comprehensive Care/Subacute Care Combined: Maryland, 1997



Source: Maryland Health Care Commission, 1997 Maryland Long Term Care Survey and 1997

Subacute Care Survey

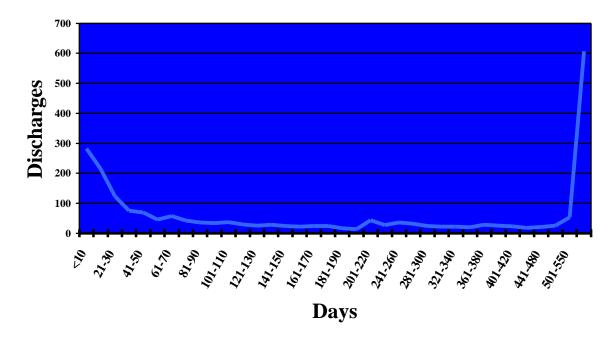
NOTE: Unduplicated count of discharges

Subacute care accounts for a significant proportion of comprehensive care discharges. The length of stay distribution for both the comprehensive care and combined subacute and comprehensive care data shows the same bimodal pattern.

The impact of subacute care discharges on length of stay for all comprehensive care beds is shown in the

mean and median lengths of stay for both data sets. The mean length of stay for the combined subacute/comprehensive care data is 257 days with a median of 22 days. The mean for the comprehensive care data alone is 413 days with a median of 41 days. The mean length of stay for hospital based subacute care facilities is 17 days with a median of 12 days.

Figure 50. Distribution of Length of Stay for Assisted Living Facilities: Maryland, 1997



NOTE: Unduplicated count of discharges

Source: Maryland Health Care Commission, 1997 Maryland Long Term Care Survey.

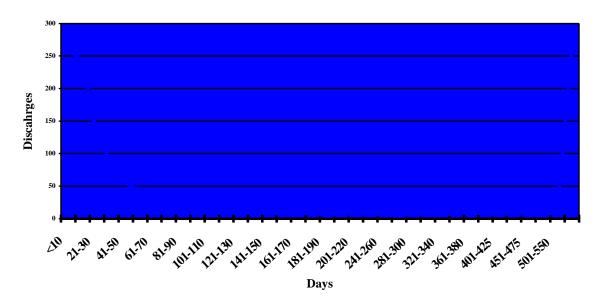
The mean length of stay for assisted living facilities is 516 days, with a median of 151 days.

Length of stay for assisted living residents shows a bimodal distribution similar to the length of stay for nursing home residents in both non-CCRC and CCRC facilities.

However, the peak length of stay for assisted living residents falls between 0 and 10 days compared to non-CCRC nursing home length of stay which falls between 10 and 20 days. This pattern is similar to the length of stay distribution of nursing home residents in CCRC facilities.

## CONTINUING CARE RETIREMENT COMMUNITY LENGTH OF STAY

Figure 51. Distribution of Length of Stay for Comprehensive Care Beds in CCRCs: Maryland, 1997



NOTE: Unduplicated count of discharges

Source: Maryland Health Care Commission. 1997 Maryland Long Term Care Survey

The mean length of stay for comprehensive care beds in CCRCs is 400 days, with a median of 26 days.

Length of stay for nursing home patients in CCRCs shows a bimodal distribution similar to the length of stay for nursing home patients in non-CCRC facilities. However, the peak length of stay for CCRCs falls between 0 and 10 days compared to non-CCRC length of stay which falls between 10 and 20 days.